

# Chapter P3: Hospitals, Similar Institutions and Care Homes

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# Chapter P3: Hospitals, Similar Institutions and Care Homes

## Hospitals and Similar Institutions

### Definition of a hospital

P3001 An NHS hospital<sup>1</sup> is

1. an institution for the reception and treatment of persons
  - 1.1 suffering from illness
  - 1.2 during convalescence
  - 1.3 needing medical rehabilitation
2. a maternity home
3. in Scotland, any institution for dental treatment maintained in connection with a dental school
4. a clinic, dispensary or out-patient department maintained in connection with any of these homes or institutions.

*1 NHS Act 06, s275; NHS (Wales) Act 06, s 206; NHS (Scot) Act 78, s 108*

### Hospital in-patient

P3002 To be treated as a hospital in-patient a person must be receiving

1. medical treatment (for example surgical treatment or administration of drugs and/or injections) **or**
2. other treatment which includes nursing services by professionally trained staff in the form of observation, therapy, support appropriate to the person's needs, advice and training in domestic and social skills.

It does not include straightforward personal care and attention by medically unqualified staff.

### A similar institution

P3003 A similar institution is not defined. If an institution does not satisfy the definition of hospital, the DM should decide as a question of fact whether it is similar to a hospital taking into account

1. the purpose of the institution **and**
2. the type of treatment provided **and**
3. the level of care offered.

P3004 – P3009

## Rules on payability for hospitals and similar institutions

P3010 No amount in respect of the daily living component or mobility component is payable for any claimant who is an in-patient<sup>1</sup> at a hospital or similar institution, where any of the costs are paid out of public funds. This is subject to the 28 day rule, see ADM Chapter P4.

*1 WR Act 12, s 86(1); SS (PIP) Regs, reg 29(1)*

P3011 For the purposes of P3010 the costs of treatment, accommodation and any related service are borne out of public funds if the claimant is undergoing the medical or other treatment as an in-patient in

1. a hospital or similar institution under specified legislation<sup>1</sup> **or**
2. a hospital or similar institution maintained or administered by the Defence Council<sup>2</sup>

*1 WR Act 12, s 86(2); NHS Act 06; NHS (Wales) Act 06; NHS (Scot) Act 78; 2 SS (PIP) Regs, reg 29(2)*

P3012 A claimant is treated as being maintained in a hospital or similar institution, where costs are borne out of public funds unless

1. accommodation and services are being provided for that person as a private patient **or**
2. the person is meeting the full cost of their maintenance as a private patient in a private hospital.

## Claimants who enter a hospital or similar institution under the age of 18

P3013 If a claimant enters the hospital or similar institution under the age of 18 payments of PIP will continue.<sup>1</sup>

**Note:** A claimant who reaches the age of 18 whilst they are a hospital in-patient will continue to be paid PIP even after the age of 18 provided that particular stay in the hospital or similar institution commenced when the claimant was under the age of 18.

*1 SS (PIP) Regs, reg 29(3)*

### Example 1

Peter turned 16 on 30.6.16 and subsequently made a claim for PIP. The DM decided that Peter was entitled to the standard rate of both the daily living and mobility component of PIP from 8.8.16 – 7.8.18. On 9.9.16 Peter enters hospital as an in-patient and remains there for 6 months. His PIP is not stopped during this period as he was under the age of 18 when he entered the hospital as an in-patient.

## Example 2

Anastasia is aged 17 and was awarded the enhanced rate of the daily living component of PIP for the period 1.7.16 – 30.6.19. She entered hospital on 10.10.16 and remained there as an in-patient until 10.12.16 when she was discharged. Whilst in hospital she turned 18 on 10.11.16. Anastasia's PIP will not be stopped for the period 10.10.16 – 10.12.16 as she was under the age of 18 when she entered the hospital as an in-patient. Anastasia is discharged and then re-enters hospital as an in-patient on 1.1.17 and remains there until 1.3.17. However, for this second spell in hospital her PIP will be stopped after 28 days as she was over the age of 18 when she entered the hospital as an in-patient. Her PIP is therefore stopped from 30.1.17 and payment will not recommence until 1.3.17.

P3014 – P3018

## Hospices

### Definition of a Hospice

P3019 A hospice<sup>1</sup> is a hospital or other institution, whose primary function is to provide palliative care for residents who have a progressive disease in its final stages.

*1 SS (PIP) Regs, reg. 30(4)*

P3020 A hospital or other institution is not a hospice<sup>1</sup> if it is

1. a health service hospital in England<sup>2</sup> **or**
2. a hospital in Wales<sup>3</sup> vested in
  - 2.1 an NHS trust **or**
  - 2.2 a local Health Board **or**
  - 2.3 the Welsh Ministers
3. a health service hospital in Scotland<sup>4</sup> **or**
4. a hospital maintained or administered by the Defence Council **or**
5. an institution similar to any of the preceding paragraphs<sup>5</sup>.

*1 SS (PIP) Regs, reg 30(4); 2 NHS Act 06, s 275(d); 3 NHS (Wales) Act 06;  
4 NHS (Scot) Act 78, s 108(1); 5 SS (PIP) Regs, reg 30(4)(e)*

### Rules on payability for hospices

P3021 PIP is payable to a person who is terminally ill and living in a hospice, provided that the DM has been informed that the person is terminally ill

1. on a claim for PIP **or**
2. on an application for revision or supersession of an award of PIP **or**
3. in writing in connection with an

- 3.1 award **or**
- 3.2 claim **or**
- 3.3 application for revision or supersession<sup>1</sup>

*1 SS (PIP) Regs, reg 30(3)*

**Note:** P3021 does not apply if the person is not entitled to PIP under the terminal illness rules (see ADM P2076 - P2079)

P3022 Where the person is not entitled to PIP under the terminal illness rules (see ADM P2076 - P2079) the DM should consider whether the rules on payability apply instead for

- 1. a hospital or similar institution<sup>1</sup> **or**
- 2. care homes<sup>2</sup>

*1 SS (PIP) Regs, reg 29; 2 SS (PIP) Regs, reg 28*

P3023 – P3026

## Care Homes

### Definition of a care home

P3027 A care home is an establishment that provides accommodation together with nursing or personal care<sup>1</sup>.

*1 WR Act 12, s 85(3), R (on the application of Moore and others) v Care Standards Tribunal [2005] EWCA Civ 627*

P3028 The DM should consider a range of evidence to determine whether on the balance of probabilities the establishment is a care home. The following table has been devised to assist the DM with this:

<b>More likely to be a care home</b>	<b>Less likely to be a care home</b>
Registered under Health and Social Care Act 2008 to provide an activity in paragraph 2(1) schedule 1 to Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – <i>residential accommodation together with nursing or personal care</i> . This may also be termed “accommodation for persons who require nursing or personal care” but check that both elements are being provided together. It may also be registered under paragraph 3 as “accommodation for persons who require treatment for substance misuse” but check what care/treatment is being provided.	Registered under Health and Social Care Act 2008 to provide an activity set out in paragraph 1 schedule 1 of Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 other than paragraph 2 (accommodation for persons who require nursing or personal care) – e.g. paragraph 1: personal care, paragraph 4: treatment of disease, disorder or injury, paragraph 5: assessment or medical treatment for persons detained under the Mental Health Act 1983, paragraph 13: nursing care.  Or not registered at all under HSCA 2008.

(To find the registration status you can search for the establishment on the Care Quality Commission website and this information can be found under "registration info" tab)	(To find the registration status you can search for the establishment on the Care Quality Commission website and this information can be found under "registration info" tab)
Described as care home, establishment, or similar institution (check Care Quality Commission reports).	Described as supported living, adult placement. Communal dwelling where main provision is accommodation and anything extra is tailored support to enable independent living.
Accommodation and care provided by same provider, same legal entity or as one service. Any tendering process did not allow different unconnected organisations to tender for the care and for the accommodation.  [If two legal bodies, check whether they have registered as a partnership for the regulated activity of accommodation together with nursing or personal care.]	Separate bodies providing accommodation and care. Provision of accommodation separate from provision of care; e.g. care provided by domiciliary care agency.
Mutual reliance or coordination between two functions of accommodation and care.  Eg. person receiving accommodation is dependent on receiving care from accommodation provider or associated company body and vice versa.	Lack of reliance and coordination between two functions of accommodation and care.
Not a private dwelling (although claimant may have own room within establishment).	Claimant living in own private dwelling or dwelling of carer.
No tenancy agreement (although claimant may have to sign behavioural or management agreement in order to receive accommodation and care). If there is a tenancy or management/framework agreement, rights of occupation should be linked to care so it is clear they are being provided as one service.	Claimant has tenancy agreement with landlord or provider of accommodation. Any agreement should show clear separation between accommodation and care.
Claimant pays nothing towards accommodation or care costs	Claimant pays private rent or housing benefit towards accommodation costs.

**Note:** None of these factors is absolutely decisive on their own. The DM needs to make a judgement based on the whole picture and the sum total of multiple factors.

## Rules on payability for care homes

### General

P3029 The daily living component is not payable where the claimant is resident in a care home **and** any of the costs of qualifying services provided for the claimant are met out of public or local funds<sup>1</sup> by virtue of specified enactments<sup>2</sup>.

**Note 1:** See P3031 for guidance on qualifying services.

**Note 2:** See P3033 – P3034 for guidance on when this does not apply.

**Note 3:** See Appendix 1 to this chapter for a care home payability flow chart.

*1 WR Act 12, s 85(2); 2 NA Act 48, Part III; SW (Scot) Act 68; MH (C&T)(Scot) Act 02; CC&H (Scot) Act 02; MH Act 83; Health and Social Care Act 01, s 57; Care Act 14, Part 1; SS (PIP) Regs, reg 28(2)*

P3030 If it is determined that a claimant is in a care home where any of the costs of qualifying services are met out of public or local funds, then any PIP daily living component will not be payable if the claimant was residing in that accommodation at the date of claim or following the first 28 days of their stay<sup>1</sup> (see P4016).

*1 SS (PIP) Regs, reg 30 (1) and (2)*

## Qualifying Services

P3031 Qualifying services<sup>1</sup> for the purposes of P3029 are

1. accommodation **or**
2. board **or**
3. personal care **or**
4. such other services as may be prescribed.

**Note:** There are no other services prescribed at present.

*1 WR Act 12, s 85(4)*

## Direct payments

P3032 The LA may make payments for care needs, including residential care, directly to the disabled person<sup>1</sup>. The person uses the payments to make their own arrangements for care services. Direct payment may not be made

1. to people aged 65 or over (unless a payment was made in the twelve months before reaching age 65<sup>2</sup>)
2. where care services are provided by any of the person's family living in the same household<sup>3</sup>
3. for periods in residential care exceeding four weeks in twelve months<sup>4</sup> unless P3033 applies.

Where a person has made their own arrangements for entering a care home using a direct payment, then this is treated as being borne out of public or local funds.

*1 Community Care (Direct Payments) Act 96, s 1; SW (Scot) Act 68, s 12B;*

*2 Community Care (Direct Payments) Regs & Community Care (Direct Payments) (Scotland) Regs, reg 2(2)(a); 3 reg 3; 4 reg 4*

P3033 From 1.11.13 payments are made for an indefinite period where they are made for the cost of residential accommodation, together with nursing or personal care, under specified legislation<sup>1</sup> by a LA listed<sup>2</sup> in the Appendix 2 to this Chapter.

Claimants affected by this are treated as receiving direct payments<sup>3</sup> under specified legislation<sup>4</sup>. Therefore, the daily living component of PIP will not be payable.

*1 Health and Social Care Act 2008, Part 1; 2 Community Care, Services for Carers and Children's Services (Direct Payments) (England) Regulations 2009, Sch 2A; 3 reg 13(2B); 4 NA Act 48, Part III*

P3034 – P3040

## Funding exceptions

P3041 Where any of the costs of any qualifying services are borne out of public or local funds by virtue of specified legislation<sup>1</sup> P3029 applies. This includes any enactment relating to persons under a disability or to young persons or to education or training. However P3029 does not apply where the cost of any qualifying service is met out of public or local funds under specified legislation for

1. grants in aid of educational services or research<sup>2</sup> **or**
2. financial assistance for purposes related to education or children in England or Wales<sup>3</sup> **or**
3. assisting persons to take advantage of educational facilities or grants to education authorities in Scotland<sup>4</sup> **or**
4. administration of funds by councils<sup>5</sup> **or**
5. support for funding of higher education and administration of funds in Scotland<sup>6</sup> **or**
6. new arrangements for giving financial support to students.<sup>7</sup>

*1 SS (PIP) Regs, reg 28(2); 2 reg 28(2)(f)(i); Ed Act 96, s 485; 3 reg 28(2)(f)(ii); Ed Act 02, s 14; 4 reg 28(2)(f)(iii) Ed (Scot) Act 80, s 49 or 73; 5 reg 28(2)(f)(iv); F&HE Act 92, s 65; 6 reg 28(2)(f)(v); F&HE (Scot) Act 05, s 4 & 11; 7 reg 28(2)(f)(vi); T&HE Act 98, s 22*

P3042 Furthermore, P3029 does not apply

1. for any period during which the LA places a person in a private dwelling with a family, or with a relative or suitable person<sup>1</sup>, provided the person is under 18 years old **and**
  - 1.1 specific legislation<sup>2</sup> (impairment of health and development) applies because the claimant's health is likely to be significantly impaired, or further impaired without the provision of services **or**
  - 1.2 specific legislation<sup>3</sup> (disability) applies because services are required for children in need of care and attention due to disability **or**
2. where accommodation is provided outside the UK and the cost is met wholly or partly by a LA under certain legislation.<sup>4</sup>

*1 SS (PIP) Regs, reg 28(4); 2 reg 28(3)(a)(i); Children Act 89, s17(10)(b); Children (Scotland) Act 95, s 93(4)(a)(ii); 3, reg 28(3)(a)(ii); Children Act 89, s17(10)(c); Children (Scotland) Act 95, s93(4)(a)(iii); 4 reg 28(3)(b); Education Act 96, s 320; Education (Scotland) Act 04, s 25*



## Self funders

P3047 PIP daily living component and the mobility component will be payable for any period where the claimant is a resident in a care home during which the whole costs of all the qualifying services are met

1. out of the resources of the person for whom the qualifying services are provided **or**
2. partly out of that person's own resources and partly with the assistance from another person or charity **or**
3. on that behalf by another person or a charity<sup>1</sup>.

*1 SS (PIP) Regs, reg 30(5)*

## People with homes to sell or who await other release of funds

P3048 People who enter a care home for the first time may have a home to sell, or other capital assets. The available assets or value of a property are taken into account by the LA when assessing payment of care home fees.

P3049 When a person first enters a care home the DM is required to establish who is funding their stay and if this will change. This information should be obtained from the LA.

**Note:** Payment should be suspended until all **reasonable** enquiries are made. Every effort should be made to resolve the issue as soon as possible and the benefit put into payment or a payability decision made.

### Example 1

Jim was receiving the enhanced rates of both the daily living and mobility components. His representative informed the DM that he had entered a care home and would not be coming home. The DM ascertained that the LA were at present funding Jim, and there was no indication that there would be any change to this arrangement. Jim's PIP was paid for the first 28 days in the care home, and then suspended until these reasonable enquiries had been made. The suspension was then lifted and a payability decision was given ceasing payment of the daily living component, but payment of the mobility component continued.

### Example 2

Hannah was in a care home but her daughter still lived in the family home. When the DM made enquiries to the LA, although there was a property involved, there was some dispute over ownership. As such the LA had not yet decided if Hannah had any assets to fund her own stay and they continued to fund in the meantime. The

DM decided that as the LA were funding, Hannah was entitled to the enhanced rate of the daily living component and standard rate of the mobility component. The daily living component was not payable however, whilst she is in the care home. At the same time they put a 12 month case control in place to assess the situation at a later stage. On activation of the case control the DM made enquires to the LA who informed him that it had been decided that Hannah did have property and that they had placed a charge on it from the date of her arrival at the home. The DM decided that as Hannah has been self-funding the original decision should be revised, as it had been made with incomplete evidence, and made payment of arrears of the daily living component from the date she had been charged for. As the DM is aware that Hannah's funding is not indefinite a further case control is set for 24 months to check on the funding status at that time.

### **Example 3**

Damien was placed in a care home and the DM made enquiries as to the nature of the funding of his care home fees. Whilst these enquiries were being made the payment of his enhanced rates of daily living and mobility components of PIP were paid for the first 28 days, and then his daily living component of PIP was suspended. On enquiries being made it was established that the LA were paying for Damien's stay and were not considering self-funding. On these findings the DM decided that the claimant could not be a self-funder and therefore the payment of his enhanced rate of daily living component was ceased from the date of the suspension, but his mobility component continued to be paid. Two years later Damien received an inheritance of a property from his great aunt. The DM was not informed immediately and it was only on a review of the benefit that it was established that Damien was now paying his own care home fees, as the property had been sold and the LA had entered into an agreement with Damien's representative. On this information the date the care home fees were being paid to the LA from was established and regulation provisions were used to supersede. As there had been a change of circumstances with the inheritance it could not be said that the original decision was made with incomplete evidence.

### **Background information**

P3050 If there is a property involved the full market value of the property is taken into account in the assessment, less 10% for selling costs and any mortgage or loan secured on it<sup>1</sup> where the claimant is the sole owner of a property

**Note:** The LA will make this calculation and advise of the amount of repayment required.

*1 NA (AR) Regs, reg 23(1)*

P3051 Until the property is sold the person will probably not be able to meet all the assessed liability to pay for the accommodation. The LA may put a charge on the property<sup>1</sup>. Once it is sold, the debt owing to the LA is repaid. Where

1. a claimant is in a care home being funded by the LA pending the sale of a property or other release of funds **and**
2. the fees will be repaid to the LA out of the proceeds of the sale of the property or release of funds

benefits should be paid unless and until the point is reached where there is a real risk that the proceeds are inadequate to make full repayment.

*1 HASSASSA Act 83, s 22(1)*

- P3052 The value of the property is disregarded by the LA for the first twelve weeks from when permanent admission commences.
- P3053 For the first twelve weeks of any such arrangement the condition in P3051 **2.** will not be satisfied as the LA will disregard the value of the property as in P3051 and the person will not have to repay the LA. If the LA is funding during this period payment of PIP daily living component should be removed from the appropriate date.
- P3054 For the purposes of P3049, conditions for payment of benefit will be satisfied if any evidence exists of an agreement to repay the LA from the sale proceeds or release of funds. However, for the purposes of community care law there is no need for a prior agreement to repay fees to the LA.

**Note:** In cases of uncertainty as to the entitlement to benefit, the benefit should be suspended.

- P3055 In cases where sales arrangements become prolonged a risk may arise that the sale proceeds will not cover the accrued debt to LA. Once such a point is reached P3051 **2.** is no longer satisfied. In such circumstances the benefit award must be superseded to remove payability.
- P3056 The effective date of the decision to remove payment of benefit is the date of change<sup>1</sup>. That date will be the point at which the accrued debt to the LA becomes greater than the value of the property as calculated in P3052. PIP daily living component may however remain payable for the first 28 days of LA funding in accordance with P4016, ADM chapter 4.

*1 UC, PIP, JSA & ESA (D&A) Regs, Sch 1, part 2, para 12.*

P3057 – P3060

## **Whether the claimant is in a similar institution to a hospital or a care home**

- P3061 When considering whether a claimant is in a care home or in 'a similar institution to a hospital', it is necessary for the DM to consider whether the claimant is undergoing medical or other treatment (see P3002), and whether the costs of treatment, accommodation or any related services are funded by the Health Authority under the relevant health service enactments for England, Scotland and

Wales. Prior to the Tribunal of Commissioners decision<sup>1</sup>, where funding was made available to a LA from a Health Authority, the LA would pass on that funding<sup>2</sup> and the claimant would be treated as being in a care home. The Tribunal of Commissioners determined, however, that the LA were merely acting as a go-between for the funds and the Health Authority continued to be responsible for those claimants. The DM will need to consider all the information on the arrangements and funding of the claimant's stay, including whether there has been an assessment of the claimant's care needs. If it is determined that the claimant is in a similar institution to a hospital then any amount of PIP would not be payable if the claimant was residing in that accommodation at date of entitlement or following the first 28 days of their stay.

*1 R(DLA) 2/06; 2 NA Act 48, Part III*

### **Example 1**

John is a 35-year-old man with severe learning difficulties, requiring 24-hour support. He has been in a long stay hospital since 2006 and has been assessed as requiring NHS continuing health care. Arrangements are made to move him to a care home. John requires regular medical or other treatment on the premises of the care home which is provided by medically qualified staff, and the NHS will continue to be responsible for fully funding his care and accommodation. The DM obtains all the facts and determines the claimant is in a similar institution to a hospital. The claimant remains entitled to PIP but it is not payable.

## **Care homes funded by NHS**

P3062 Where any of the costs of the treatment, accommodation and any related services are paid by the NHS under the relevant National Health Service legislation, DMs should establish if

1. the care home employs doctors, qualified nurses or other health professionals, **and**
2. the claimant receives medical or other treatment by or under the direct supervision of a qualified doctor, nurse or nurses at the care home.<sup>1</sup>

Where both **1.** and **2.** apply DMs should treat the care home as a similar institution to a hospital and follow the guidance at P3010-12.

Where both **1.** and **2.** do not apply the DM should continue to treat the establishment as a care home and the daily living component would not be payable<sup>2</sup> in accordance with P3029.

*1 SSWP v Slavin [2011] EWCA Civ 1515; SS (PIP) Regs, reg 29(2); 2 reg 28(2)(f)*

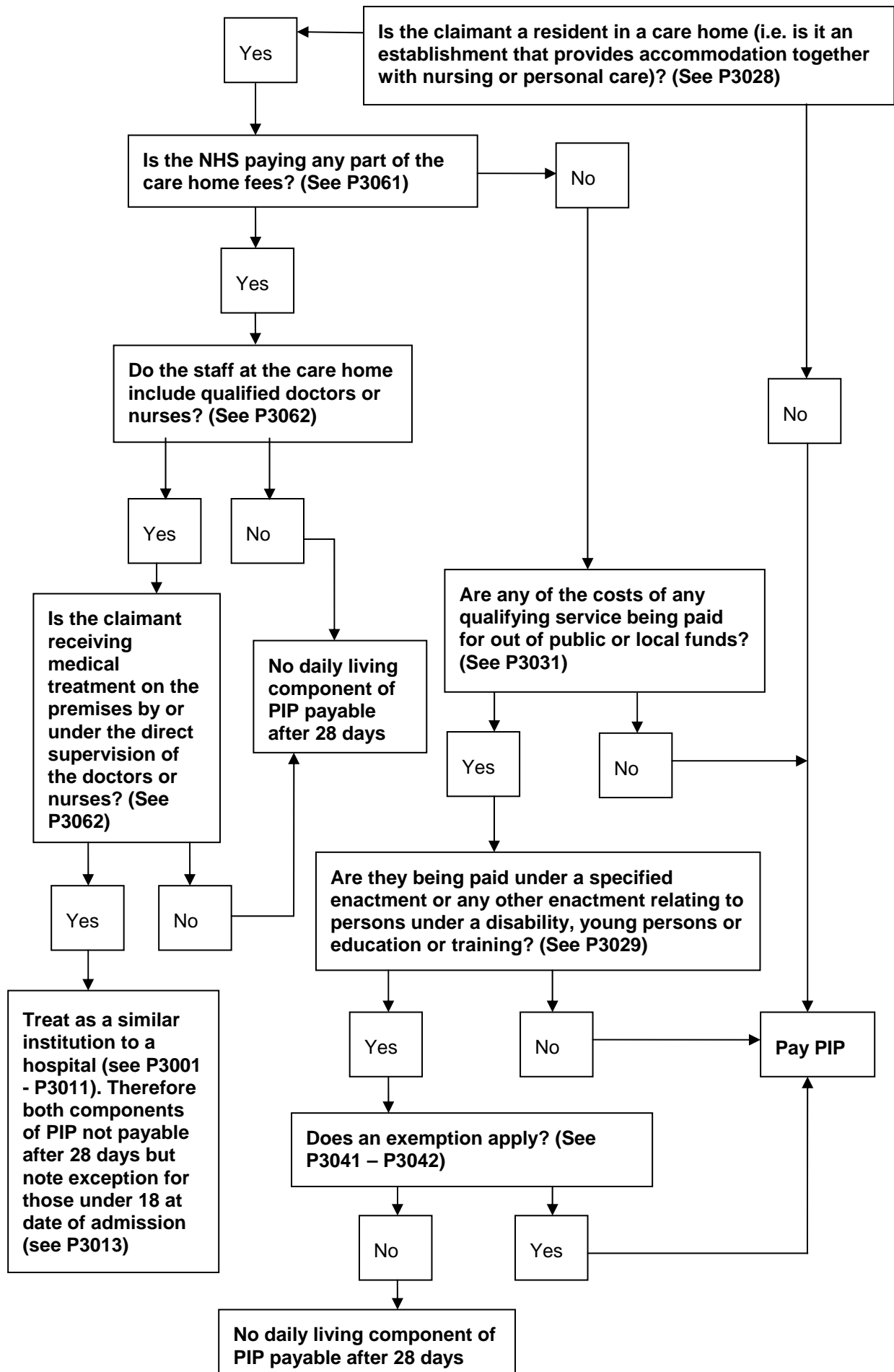
**Example 1**

James is entitled to the enhanced rate of both the daily living and mobility component of PIP. He informs the DM that he has moved into a care home for the next 6 months and his stay is funded by the NHS. The DM makes enquiries and determines that the care home employs 1 doctor and 2 nurses who administer medication to James on a daily basis on the premises of the care home. The DM therefore decides that the care home should be treated as a similar institution to a hospital and therefore both the daily living and mobility component of PIP are not payable after 28 days from the day he entered the care home.

**Example 2**

Jasmine is entitled to the standard rate of both the daily living and mobility component of PIP. She informs the DM that she entered a care home on 1.6.16. Jasmine's stay at the care home is funded by the NHS. After making further enquiries the DM establishes that there are no medical professionals employed by the care home and care workers provide daily care for Jasmine and her GP visits her once a fortnight on the premises. The DM decides that the care home should not be treated as a similar institution to a hospital and therefore in accordance with P3029 the daily living component of PIP is not payable from 30.6.16. The mobility component of Jasmine's PIP award remains payable whilst she is a resident in the care home.

## Appendix 1: Care home payability flow chart



### **Example 1**

Simon is a resident at ABC House. He has his own room within the establishment and has access to communal areas including a living room, activity room and kitchen. Enquires indicate that ABC House employs on-site care assistants who help Simon with personal care tasks such as washing, dressing and feeding himself at meal times. According to the CQC, ABC House is registered to provide “accommodation for persons who require nursing or personal care”. Simon does not pay anything towards the costs of his stay. The DM decides, taking into account all factors, that ABC House is an establishment that provides accommodation together with nursing or personal care and therefore Simon is a resident in a care home. Further enquiries undertaken by the DM indicate that Simon’s stay in the care home is funded by the local authority under Part 1 of the Care Act 2014. As this is a specified enactment for the purposes of P3029, Simon’s daily living component of PIP is not payable after 28 days residence at ABC House. Simon continues to be paid the mobility component of PIP during his stay at ABC House.

### **Example 2**

Jade is in receipt of the standard rate of the daily living component of PIP. On 1.8.16 Jade informs the DM that she has moved out of her parent’s home and is now resident at XYZ Place. XYZ Place is a large semi detached house owned by the local authority which is converted into 3 separate flats occupied by Jade and 2 other people. Jade holds a tenancy agreement for her flat which details how much rent should be paid per month and what responsibilities she has for the property. Jade is in receipt of Housing Benefit which she uses to fund the monthly rent and the LA has also arranged for a domiciliary care agency to provide a carer for Jade on a morning and evening to help her get washed and dressed/undressed each day. The LA is responsible for the funding of the carer. Having looked at all of the available evidence the DM decides that XYZ Place should not be treated as an establishment that provides accommodation together with nursing or personal care in accordance with P3028. Therefore Jade’s daily living component of PIP can continue to be paid.

### **Example 3**

Grant turned 17 years old on 16.6.16 and has been in hospital since 30.6.16. He is entitled to the enhanced rate of both the daily living and mobility component and this remains payable whilst in hospital as an in-patient due to Grant being under 18 years old at the date of admission. Grant notifies the DM on 1.9.16 that he will move to YYZZ House on 5.9.16 and enquiries indicate that this establishment is registered to provide “accommodation for persons who require nursing or personal care” and is described as a “care home” in CQC reports. The DM establishes that the NHS will fund Grant’s stay under the NHS Act 2006 and further enquiries indicate that there is a doctor and nurse employed on site who will administer a series of daily injections to Grant for the next 6 months. Although YYZZ House can be described as an establishment that provides accommodation together with nursing or personal care, in accordance with P3062 – P3064 the DM decides that the care home should

be treated as a similar institution to a hospital. Grant's PIP therefore remains payable as he is under 18 at the date of admission to YYZZ House.



## **Appendix 2: List of local authorities for the purpose of P3033**

Bristol City Council

Cornwall Council

Dorset County Council

Gateshead Council

Hertfordshire County Council

Hull City Council

Lincolnshire County Council

London Borough of Enfield

London Borough of Havering

London Borough of Redbridge

Manchester City Council

Milton Keynes Council

Norfolk County Council

North Lincolnshire Council

Nottinghamshire County Council

Staffordshire County Council

Stockport Council

Surrey County Council

**The content of the examples in this document (including use of imagery) is for illustrative purposes only**